

## ISSUE SLIP STAMP AREA (for additional cross references)

ACTION	DATE	ID NO.	DATE
<b>FEE DETERMINATION</b>	T-6		11/19/01
<b>O.I.P.E. CLASSIFIER</b>			11-28-01
<b>FORMALITY REVIEW</b>	S-12	1035	11-29-01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	11/20/01
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If more than 150 claims or 10 actions  
staple additional sheet here